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## **POWER OF ATTORNEY OR AUTHORIZATION OF AGENT**

10/628,141 July 24, 2003 Srinivas G. Rao		
		vention of Depression Secondary to Pain (DSP)
CYPR 101		

Practitioners at Customer Number  OR  Practitioner(s) named below:  Patent TRADEMARK OFFICE  Name  Registration Number  11,284  Zhaoyang Li  Rivka D. Monheit  Todd S. Hofmeister  as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.  Please change the correspondence address for the above-identified application to:  I The above-mentioned Customer Number.  OR  Practitioners at Customer Number.  OR  Practitioners at Customer Number   Address  Suite 2000, One Atlantic Center  Address  1201 West Peachtree Street, N.E.  City  Atlanta  State  GA  Zip  30309-3400  Country  USA  Telephone  (404) 817-8473  Fax  [404) 817-8588  I am the:  Applicant/Inventor.  I Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name  Jay  August 22, 2003  NOTE: Signature   August 22, 2003  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required. Submit multiple	I hereby appoir	nt:			
Practitioner(s) named below:    Patent Trademark office   Patent Trademark office					
Practitioner(s) named below:    Patrex   Name   Registration Number	- Tradition	ers at Customer Number 2	3579		
Name   Registration Number   21,284   Zhaoyang Li   46,872   Rivka D. Monheit   48,731   Todd S. Hofmeister   55,029			DATES TO A DELACE		
Patrea L. Pabst Zhaoyang Li Zhaoyang Li Zhaoyang Li Rivka D. Monheit Todd S. Hofmeister  as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.  Please change the correspondence address for the above-identified application to:    The above-mentioned Customer Number.	Practitione				
Thaoyang Li  Rivka D. Monheit  A8,731  Todd S. Hofmeister  as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.  Please change the correspondence address for the above-identified application to:    The above-mentioned Customer Number.	Datres				
Rivka D. Monheit  Todd S. Hofmeister  as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.  Please change the correspondence address for the above-identified application to:  The above-mentioned Customer Number.  Practitioners at Customer Number.  Patrea L. Pabst; Holland & Knight LLP  PATENT TRADEMARK OFFICE  Address  Suite 2000, One Atlantic Center  Address  City  Atlanta  State  GA  Zip  30309-3400  Country  USA  Telephone  (404) 817-8473  Fax  [404) 817-8588  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name  Signature  Date  August 22, 2003  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.					
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Description of the United States Patent and Trademark Office connected therewith.  Please change the correspondence address for the above-identified application to:    The above-mentioned Customer Number.	1044	5. 1101111015101			
Please change the correspondence address for the above-identified application to:    X					
The above-mentioned Customer Number  OR  Practitioners at Customer Number  OR  Firm or Individual Name  Address  Suite 2000, One Atlantic Center  Address  1201 West Peachtree Street, N.E.  City  Atlanta  State  GA  Zip  30309-3400  Country  USA  Telephone  (404) 817-8473  Fax  (404) 817-8588  I am the:  Applicant/Inventor.  X Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name  Jay Kranzler  Signature  Date  August 22, 2003  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	business in the L	Inited States Patent and Trademark	Office connected therewith.		
Practitioners at Customer Number  OR  Practitioners at Customer Number  Prim or Individual Name  Address  Suite 2000, One Atlantic Center  Address  1201 West Peachtree Street, N.E.  City  Atlanta  State  GA  Zip  30309-3400  Country  USA  Telephone  (404) 817-8473  Fax  (404) 817-8588  I am the:  Applicant/Inventor.  X Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name  Jay Kranzler  Signature  Date  August 22, 2003  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.		•	pove-identified application to:		
Practitioners at Customer Number  OR  Patrea L. Pabst; Holland & Knight LLP  PATENT TRADEMARK OFFICE  PATENT TRADEMARK OFFICE  Address  Suite 2000, One Atlantic Center  Address  1201 West Peachtree Street, N.E.  City  Atlanta  State GA  Zip 30309-3400  Country  USA  Telephone  (404) 817-8473  Fax (404) 817-8588  I am the:  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name  Jay Kranzler  Signature  Date  August 22, 2003  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.		mentioned Customer Number.			
Firm or Individual Name  Patrea L. Pabst; Holland & Knight LLP  Address  Suite 2000, One Atlantic Center  Address  1201 West Peachtree Street, N.E.  City  Atlanta  State GA  Zip 30309-3400  Country  USA  Telephone  (404) 817-8473  Fax (404) 817-8588  I am the:  Applicant/Inventor.  Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name  Jay Kranzler  Signature  Date  August 22, 2003  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	<del></del>				
Firm or Individual Name  Address  Suite 2000, One Atlantic Center  Address  1201 West Peachtree Street, N.E.  City  Atlanta  State  GA  Zip  30309-3400  Country  USA  Telephone  (404) 817-8473  Fax  I am the:  Applicant/Inventor.  X Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name  Jay Kranzler  Signature  Date  August 22, 2003  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.		s at Customer Number			
Address Suite 2000, One Atlantic Center  Address 1201 West Peachtree Street, N.E.  City Atlanta State GA Zip 30309-3400  Country USA  Telephone (404) 817-8473 Fax (404) 817-8588  I am the:  Applicant/Inventor.  X Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name Jay Kranzler  Signature August 22, 2003  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.			PATENT TO ADELYANY OFFICE		
Address 1201 West Peachtree Street, N.E.  City Atlanta State GA Zip 30309-3400  Country USA  Telephone (404) 817-8473 Fax (404) 817-8588  I am the: Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name Jay Kranzler  Signature Date August 22, 2003  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	l 1 /	ne Patrea L. Pabst; Holland & I	Knight LLP		
City Atlanta State GA Zip 30309-3400  Country USA  Telephone (404) 817-8473 Fax (404) 817-8588  I am the: Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name Jay Kranzler  Signature August 22, 2003  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Address				
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Telephone (404) 817-8473 Fax (404) 817-8588  I am the: Applicant/Inventor.  Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name  Date August 22, 2003  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	City	Atlanta State GA Zip 30309-3400			
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Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).  SIGNATURE of Applicant or Assignee of Record  Name  Day  August 22, 2003  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Telephone (404) 817-8473 Fax (404) 817-8588		Fax (404) 817-8588		
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SIGNATURE of Applicant or Assignee of Record  Name  Signature  Date  August 22, 2003  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	☐ Applicant	/Inventor.			
SIGNATURE of Applicant or Assignee of Record  Name  Signature  Date  August 22, 2003  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.					
SIGNATURE of Applicant or Assignee of Record  Name  Jay Kranzler  Signature  Date  August 22, 2003  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.					
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Date  August 22, 2003  NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Name	Jay Kranzler			
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.	Signature	Jan Hund			
forms if more than one signature is required, see below*.	Date	August	22, 2003		
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Title of Invention

Additional inventors are being named on.

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## DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN APPLICATION DATA SHEET (37 CFR 1.76)

TREATMENT AND PREVENTION OF DEPRESSION SECONDARY TO PAIN (DSP)

As the below named inventor(s), I/we declare that:			
This declaration is directed to:			
☐ The attached application, or			
Application No. 10/628, 141, filed onJuly 24, 2003,			
as amended on(if applicable);			
I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;			
I/ we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;			
I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.			
All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.			
FULL NAME OF INVENTOR(S)			
Inventor one: Srinivas G. Rao			
Signature: Citizen of: US			
Inventor two: Jay D. Kranzler			
Signature: Citizen of: US			
Inventor three:			
Signature: Citizen of:			
Inventor four:			

Burden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

\_additional form(s) attached hereto.

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## STATEMENT UNDER 37 CFR 3.73(b) Applicant/Patent Owner: Srinivas G. Rao and Jay D. Kranzler Filed/Issue Date: July 24, 2003 Application No./Patent No.: 10/628, 141 Treatment and Prevention of Depression Secondary to Pain (DSP) corporation of the State of Delaware Cypress Bioscience, Inc. a\_ (Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.) states that it is: 1. X the assignee of the entire right, title, and interest; or 2. an assignee of less than the entire right, title and interest. The extent (by, percentage) of its ownership interest is \_ in the patent application/patent identified above by virtue of either: A. |X| An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame \_\_\_\_, or for which a copy thereof is attached. OR B. [ ] A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below: \_To:\_ The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame\_\_\_\_\_, or for which a copy thereof is attached. To: The document was recorded in the United States Patent and Trademark Office at Reel \_\_\_\_\_, Frame\_\_\_\_\_, or for which a copy thereof is attached. \_\_\_\_To:\_\_\_ The document was recorded in the United States Patent and Trademark Office at Reel\_\_\_\_\_, Frame\_\_\_\_\_, or for which a copy thereof is attached. [ ] Additional documents in the chain of title are listed on a supplemental sheet. [ ] Copies of assignments or other documents in the chain of title are attached. [NOTE: A separate copy (i.e., the original assignment document or a true copy of the original document) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.08] The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

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## **ASSIGNMENT**

We, Srinivas G. Rao of 11590 Jaguar Court, San Diego, California 92131, and Jay D. Kranzler of 7395 Via Capri, La Jolla, California 92037, in consideration of ten dollars and other valuable consideration paid to us by Cypress Bioscience, Inc., a corporation of the State of Delaware, having its principal place of business at 4350 Executive Drive, San Diego, California 92121 (hereinafter "said Assignee"), the receipt of which is hereby acknowledged, do hereby sell, assign and transfer unto said Assignee, its successors and assigns, the entire interest for the United States of America, and its territories and all foreign countries and jurisdictions, including all rights of priority under the International Convention for the Protection of Industrial Property, in a certain invention or improvement in "Treatment and Prevention of Depression Secondary to Pain (DSP)" described in U.S. Serial No. 10/628, 141 filed in the United States Patent and Trademark Office on July 24, 2003, by Srinivas G. Rao and Jay D. Kranzler, which is a continuation-in-part of U.S. Serial No. 10/028,547 filed December 19, 2001, which is a continuation-in-part of U.S. Serial No. 10/014,149 filed November 5, 2001, and in the two provisional applications to which priority is claimed, being U.S. Serial No. 60/398,676-filed on July 24, 2002; and U.S. Serial No. 60/443,035 filed on January 28, 2003; and in all Letters Patent of the United States and its territories and all foreign countries and jurisdictions which may or shall be granted on said inventions, or any parts thereof, or on said applications, or any provisional, divisional, continuation, continuation-in-part, reissue, or other applications based in whole or in part thereon. And we agree, for ourselves and our executors and administrators, with said Assignee and its successors and assigns, but at its or their expense or charges, hereafter to execute all applications, amended specifications, deeds or other instruments, and to do all acts necessary or proper to secure the grant of Letters Patent in the United States and its territories and in all other foreign countries and jurisdictions to said Assignee, with specifications and claims in such form as shall be approved by the counsel of said Assignee, and to vest and confirm in said Assignee, its success rs and assigns, the legal title tall such patents.

Title: "Treatment and Prevention of Depression Secondary to Pain (DSP)"

By: Srinivas G. Rao and Jay D. Kranzler

Filed: July 24, 2003 ASSIGNMENT

And we do hereby authorize and request the Commissioner of Patents and Trademarks of the United States to issue such Letters Patent as shall be granted upon said application or applications based thereon to said Assignee, its successors and assigns.

WIFNESS my hand a	and seal this	_ day of _ Angust	, 2003.
	,	Srinivas G, R	10
State of California  County of San Dogo	)= )		
foregoing instrument to be h		med Srinivas G. Rao and acknowled, before me this	owledged the day of
ų.	_	Lynthia Edition Notary Public	ayapo_
My Commission expires:	Sep. 7,200	Beroser & noise	COUNTY CONTRACT CONTR

Title: "Treatment and Prevention of Depression Secondary to Pain (DSP)" By: Srinivas G. Rao and Jay D. Kranzler

Filed: July 24, 2003 ASSIGNMENT

WITNESS my hand and seal this 22	day of	BOOD BO	, 2003.
	Jan 9	Jay D. Kranzler	
State of California  County of San Dago			
Then personally appeared the above nar foregoing instrument to be his free act and deed the above nar foregoing instrument to be his free act and deed the above nar foregoing instrument to be his free act and deed the above nar foregoing instrument to be his free act and deed the above nar foregoing instrument to be his free act and deed the above nar foregoing instrument to be his free act and deed the above nare foregoing instrument to be his free act and deed the above nare foregoing instrument to be his free act and deed the above nare foregoing instrument to be his free act and deed the above nare foregoing instrument to be his free act and deed the above nare foregoing instrument to be his free act and deed the above nare foregoing instrument to be his free act and deed the above nare foregoing instrument to be his free act and deed the above nare foregoing instrument to be his free act and deed the above nare foregoing instrument to be his free act and deed the act and deed the act and deed the act and act act act act and act	· ·		edged the

August

My Commission expires:



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PTO/SB/21 (08-03) Approved for use through 07/31/2006. OMB 0651-0031 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE SEP 2 2 2003 the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number **Application Number** 10/628,141 THADE **TRANSMITTAL** Filing Date July 24, 2003 **FORM** First Named Inventor Srinivas G. Rao Art Unit (to be used for all correspondence after initial filing) **Examiner Name** Attorney Docket Number **CYPR 101** Total Number of Pages in This Submission **ENCLOSURES** (Check all that apply) After Allowance communication ~ to Group Fee Transmittal Form Drawing(s) Appeal Communication to Board Licensing-related Papers ~ of Appeals and Interferences Fee Attached Appeal Communication to Group Petition (Appeal Notice, Brief, Reply Brief) Amendment/Reply Petition to Convert to a Proprietary Information After Final **Provisional Application** Power of Attorney, Revocation Status Letter Change of Correspondence Address Affidavits/declaration(s) Other Enclosure(s) (please Terminal Disclaimer Identify below): Extension of Time Request **Executed Declaration for Patent** Request for Refund Express Abandonment Request Application; Statement Under 37 CFR 3.73(b); Return Postcard CD, Number of CD(s) Information Disclosure Statement Remarks Certified Copy of Priority Document(s) Response to Missing Parts/ Incomplete Application

Response to Missing Parts under 37 CFR 1.52 or 1.53

Patrea L./Pabst, Esq., Reg. No. 31,284

Firm

Individual name Signature

Signature

Date	Septe	mber 17, 2003
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I hereby certi sufficient pos the date show	tage as first o	prrespondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on
Typed or prir	nted name	Pam Turnbough

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Suite 2000, One Atlantic Center; 1201 West Peachtree Street, N.E.; Atlanta, GA 30309-3400

Holland & Knight LLP

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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September 19, 2003

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(\$) 65.00

Effective 01/01/2003. Patent fees are subject to annual revision

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT

Complete if Known			
Application Number	10/628,141		
Filing Date	July 24, 2003		
First Named Inventor	Srinivas G. Rao		
Examiner Name			
Art Unit			
Attorney Docket No.	CYPR 101		

Credit card Money Order None  Deposit Account:  Deposit Account Sumber Deposit Account Holland & Knight LLP Name  The Director is authorized to: (check all that apply)  Charge fee(s) indicated below  Credit card Money Order None  Account Sumber Code (\$)  Account Name  The Director is authorized to: (check all that apply)  Charge fee(s) indicated below  Credit any overpayments  Cother None  Account Sumber Code (\$)  Code (\$)	
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Charge fee/s) indicated below Credit any overnayments 1012 2,320 1012 indicated below Credit any overnayments	$\neg$
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Charge any additional fee(s) during the pendency of this application Charge any additional fee(s) during the pendency of this application Total Photos Examiner action	
Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.  1805 1,840* 1805 1,840* Requesting publication of SIR after Examiner action	_
FEE CALCULATION 1251 110 2251 55 Extension for reply within first month	
1. BASIC FILING FEE 1252 410 2252 205 Extension for reply within second month	
Large Entity Small Entity 1253 930 2253 465 Extension for reply within third month	<b>—</b> ↓
Fee Fee Fee Fee Description Fee Paid 1254 1,450 2254 725 Extension for reply within fourth month	[
1001 750 2001 375 Utility filing fee 1255 1,970 2255 985 Extension for reply within fifth month	$\dashv$
1002 330 2002 165 Design filing fee 1401 320 2401 160 Notice of Appeal	-4
1003 520 2003 260 Plant filing fee 1402 320 2402 160 Filing a brief in support of an appeal	_
1004 750 2004 375 Reissue filing fee 1403 280 2403 140 Request for oral hearing	
1005 160 2005 80 Provisional filing fee 1451 1,510 1451 1,510 Petition to institute a public use proceeding	
SUBTOTAL (1) (\$) 0.00   1452   110   2452   55 Petition to revive - unavoidable	
1453 1,300 2453 650 Petition to revive - unintentional	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE 1501 1,300 2501 650 Utility issue fee (or reissue)	_
Extra Claims below Fee Paid 1502 470 2502 235 Design issue fee  Total Claims 2011 = X 4503 630 345 Float issue fee	
Independent 1503 630 2503 315 Plant Issue lee	
Multiple Dependent	
1807 50 Processing fee under 37 CFR 1.17(q)	
Large Entity   Small Entity   Small Entity   1806 180 Submission of Information Disclosure Stmt   1806 180 Submission On Information Discl	
Code (\$) Code (\$)  Code (\$)  Code (\$)  Code (\$)  Code (\$)	_ [
1202 18 2202 9 Claims in excess of 20 1809 750 2809 375 Filing a submission after final rejection	$\neg$
1201 84 2201 42 Independent claims in excess of 3 (37 ČFR 1.129(a))	$\dashv$
1203 280 2203 140 Multiple dependent claim, if not paid 1810 750 2810 375 For each additional invention to be examined (37 CFR 1.129(b))	
1204 84 2204 42 ** Reissue independent claims over original patent 1801 750 2801 375 Request for Continued Examination (RCE)	- 1
1205 18 2205 9 ** Reissue claims in excess of 20 1802 900 1802 900 Request for expedited examination of a design application	
SUBTOTAL (2) (\$) 0.00 Other fee (specify)	
**or number previously paid, if greater; For Reissues, see above	

SUBTOTAL (2) (\$) 0.00

\*\*or number previously paid, if greater; For Reissues, see above

Complete (if applicable))

Name (Print/Type)

Patrea Paid Subtotal (3) (\$) 65.00

Registration No. (Attorney/Agent)

Signature

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This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the wincluding gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce. P.O. Box 1450. Alexandria VA 22313 1450. BO NOT CEND TOTAL TOT the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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